

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/306089
	Filing Date	05/06/1999
	First Named Inventor	Vijay K Bhagavath et al.
	Group Art Unit	2664
	Examiner Name	R. Ngo
Total Number of Pages in this Submission	Attorney Docket Number	113495

Enclosures (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits / Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 <input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Assignment & Recordation Cover Sheet <input checked="" type="checkbox"/> Drawing(s) & Letter to Official Draftsman <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition to the Commissioner <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communications to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communications to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> CD, Number of CDs <input type="checkbox"/> Additional enclosure(s) (please identify below)
Remarks		

CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label		Customer Number - 26652	or <input checked="" type="checkbox"/> Correspondence address below	
NAME	Samuel H. Dworetzky			
ADDRESS	AT&T CORP. P.O. Box 4110			
CITY	Middletown	STATE	New Jersey	ZIP CODE 07748-4110
COUNTRY	United States of America			FAX 732-368-6932
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED				
NAME	Michele L. Conover	Reg. #	34962	
TELEPHONE	908-221-5773			
SIGNATURE	Michele L. Conover		DATE	5/1/02

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage thereon as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on this date: 5/1/02			
Type or Printed Name	Nancy C. Marcovici		
Signature	Nancy C. Marcovici	Date	5/1/02

SEND TO: Commissioner for Patents, Washington, D.C. 20231



IN THE UNITED STATES
PATENT AND TRADEMARK OFFICE

Applicant(s): Vijay K. Bhagavath et al
Attorney Docket No.: 113495
Application No.: 09/306,089
Filing Date: 05/06/1999
Examiner Name: Ricky Quoc Ngo
Group Art Unit: 2664
Conf. No. 3006
Title: Network-Based Service For Originator-Initiated Automatic Repair Of IP Multicast Sessions

COMMISSIONER FOR PATENTS
WASHINGTON, D.C. 20231
ATTN: Official Draftsman

Enclosed are the formal drawings (20 sheets) for the above-identified application. Please substitute these formal drawings for the informal drawings filed with the application. A duplicate copy of this letter is enclosed.

Date: 5/1/02

By: Michele L. Conover
Michele L. Conover
Attorney for Applicant(s)
Reg. No.: 34962
T: 908-221-5773
F: 732-368-6932
AT&T CORP.
P.O. Box 4110
Middletown, New Jersey 07748-4110